PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10301827

		CLAIMS						-				
				(Column 1)		(Column 2)		SMALL ENTITY		0		ER THAN L ENTITY
	TOTAL CLAIM	1S 	120	29:				RATE	FEE		RATE	
	FOR	NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FE		┥.	BASIC FE		
Ľ	TOTAL CHARG	EABLE CLAIMS	29	29 minus 20=		• . 9		XS 9=			X\$18=	16.6
L	NDEPENDENT	CLAIMS	4	minus 3 =	•			X43=	 	7	Yes	
L	MULTIPLE DEPI	ENDENT CLAIM	PRESENT					+145=			`	8.6
ŀ	* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL	-	JOF		0.
ı			IOIAL	<u> </u>	OF		1.0.18					
-		(Column 1)		(Colum	(Column 2) (Column 3)			SMALL	ENTITY	OR		R THAN ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAI FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
AM	Independent FIRST PRES	ENTATION OF M	Minus	PENDENT	CLAIM	- [-	[X43=		OR	X86=	·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=	
	•									OR	TOTAL	
(Column 1) (Column 2) (Column 3)												
8		CLAIMS REMAINING		HIGHES			-		ADDI-	1		488
AMENDMENT B		AFTER AMENDMENT		PREVIOU PAID FO	SLY	PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL FEE
	Total	*	Minus	••	•			X\$ 9=		OR	X\$18=	
AM	Independent FIRST PRESE	NTATION OF MI	Minus	PENDENT C	1 AIM			X43=	T I	OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=	
											. TOTAL	
ADDIT, FEEOH ADDIT,												
AMENDMENT C		CLAIMS REMAINING . AFTER AMENDMENT	•	HIGHES NUMBER PREVIOUS PAID FOI	T R SLY	PRESENT EXTRA	F		ADDI- TIONAL FEE	•	RATE	ADDI- TIONAL
	Total	•	Minus	**	-		—	\$ 9=			X\$18=	FEE
	Independent		Minus	***		=	-			OR		
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT CL	.AIM		 _	(43=		OR	X86=	
* If the entry in column 1 is less than the entry in column 2, write "o" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** TOTAL OR 10074											·	
	the "Highest Nun	nber Previously Pai ober Previously Pai oer Previously Paid	For IN THIS I For IN THIS	SPACE is les	s than 2	0, enter 20.		IT. FEE		OR AL	TOTAL DOTT. FEE on 1.	
D: 4 :	-							•	· · · .	٠.		